

**UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS**

SANDY JO BATTISTA,

Plaintiff,

v.

Civil Action No. 05-11456-DPW

KATHLEEN M. DENNEHY, et al.,

Defendants.

**MEMORANDUM OF LAW IN SUPPORT OF DEFENDANTS’
RENEWED MOTION FOR AN ORDER COMPELLING
PLAINTIFF TO SUBMIT TO MENTAL EXAMINATIONS**

INTRODUCTION

Defendants, through counsel, hereby move that an order be issued by this Court requiring the plaintiff to submit to a mental examination by suitably licensed and certified examiners, pursuant to Fed. R. Civ. P. 35(a). Defendants seek to have the plaintiff examined by experts in the area of gender identity disorders. At the present time, defendants seek to have Cynthia S. Osborne, M.S.W. , an expert in the diagnosis and treatment of GID conduct an examination of plaintiff. (A copy of the expert examiner’s curriculum vitae is attached hereto as Attachment A). Defendants further request that Ms. Osborne or other mental health professionals, be permitted to conduct psychological tests on plaintiff as part of the mental examinations.

ARGUMENT

Rule 35(a) of the Federal Rules of Civil Procedure provides that when the mental condition of a party is in controversy, the court may order the party to submit to a mental examination by a “suitably licensed or certified examiner” upon a showing of good cause and with notice to the party to be examined. Fed. R. Civ. P. 35(a). Pursuant to rule 35, a court may order a physical or mental examination if the physical or mental condition of a party is genuinely in controversy and good cause

exists for ordering the examination. *See Schlagenhauf v. Holder*, 379 U.S. 104, 117-119 (1964); *Sacramona v. Bridgestone/Firestone, Inc.*, 152 F.R.D. 428, 431 (D. Mass. 1993) (pleadings alone are sufficient to satisfy burden when a plaintiff in a negligence action asserts a mental or physical injury); *Cabana v. Forcier KNATrucking Co.*, 200 F.R.D. 9, 12 (D. Mass. 2001) (report from plaintiff's nueropsychologist placed his mental condition in controversey). Like other discovery rules, Rule 35 is to be construed liberally. *Schlagenhauf v. Holder*, 379 U.S. at 114-115. "Rule 35 motions which seek Court-ordered mental examinations, are typically granted when one or more of the following factors are present: 1) a cause of action for intentional or negligent emotional distress; 2) an allegation of a specific mental or psychiatric injury or disorder; 3) a claim of unusually severe emotional distress; 4) the plaintiff's offer of expert testimony to support a claim of emotional distress; and/or 5) the plaintiff's concession that her mental condition is 'in controversy' within the meaning of Rule 35." *O'Sullivan v. State of Minnesota*, 176 F.R.D. at 328, (quoting *Turner v. Imperial Stores*, 161 F.R.D. 89, 93 (S.D. Cal. 1995)). "The factors reviewed in determining 'good cause' often merge with those requirements necessary to find that a plaintiff's mental state is 'in controversy.'" *Lahr v. Fulbright & Jaworski, L.L.P.*, 164 F.R.D. 196, 198 (N.D. Tex. 1995)(quoting *Duncan v. Upjohn*, 155 F.R.D. 23, 25 (D. Conn 1994)). Where a plaintiff has placed his mental state in controversy, "it is essential of the defendant to have the reasonable opportunity to challenge plaintiff's claim and testimony ... [and] the testimony of an expert is a well recognized and reasonable way of doing so." *Ali v. Wang Laboratories, Inc.*, 162 F.R.D. 165, 168 (M.D. Fla. 1995).

Here, it is clear that plaintiff has placed his mental condition into controversy where his complaint seeks treatment for his alleged gender identity disorder, a psychiatric disorder recognized by the *Diagnostic and Statistical Manual of Mental Disorders*, (American Psychiatric Association 4th ed. Revised.). In addition to the allegations contained in his complaint, plaintiff has submitted

affidavits which allege that, as a result of his gender disorder, he is potentially at risk for suicide or self-inflicted injury if he does not receive the medical treatment he demands. Plaintiff has also submitted the reports of mental health professionals in support of his claim that he suffers from GID and requires treatment in the form of female hormones. Further, numerous pleadings submitted by plaintiff have conceded that his mental status has been placed in controversy in this action.

Defendants assert that good cause exists to compel plaintiff to submit to a mental examinations conducted by experts in the field of GID. In particular, defendants seek to compel plaintiff to submit to a mental examination by GID professional, Cynthia Osborne, M.S.W. First, where there are divergent opinions among mental health professionals who have examined plaintiff regarding the existence of a gender disorder, a complete mental examination by defendants' expert, Cynthia Osborne, which will include an in-person examination, a review of plaintiff's medical records, including prior psychological evaluations, and psychological testing, is necessary to assist the DOC's Health Services Division in evaluating the existence of a gender disorder and the medical necessity of medical treatment. This is especially true where the treatment sought by plaintiff, i.e., female hormones, castration or sex reassignment surgery, is irreversible. A mental examination by defendants' expert(s) is necessary in order that the defendants may obtain a thorough mental evaluation of plaintiff, including the presence of Axis II personality disorders that may play a role in plaintiff's mental disorders. Moreover, as described in the affidavits of Lawrence Weiner previously submitted by defendants, the DOC's Health Services Division has serious concerns regarding the thoroughness of the Fenway Clinic evaluation of plaintiff and defendants believe that a complete evaluation of plaintiff is required before irreversible medical treatment is authorized. Mental examinations, including in-person examinations, will provide Ms. Osborne and other experts with an opportunity to evaluate plaintiff's alleged gender identity disorder in relation to other mental disorders

affecting plaintiff, and to make treatment recommendations, taking into account his status as an individual serving a day to life involuntary civil commitment as a sexually dangerous person.

Second, while Cynthia Osborne, M.S.W. has conducted a peer review of the reports of mental health professionals evaluating plaintiff's alleged gender identity disorder, including the Fenway Clinic report, and portions of plaintiff's medical records, this Court noted in its March 22, 2006 Memorandum and Order on plaintiff's motion for preliminary injunction, that the weight accorded Ms. Osborne's report is limited by the fact that she has not personally met with plaintiff. *Battista v. Dennehy, et al.*, 2006 WL 1581528 n. 15 (D. Mass.). Permitting Ms. Osborne and other experts to personally evaluate plaintiff is necessary to provide for a more thorough evaluation of plaintiff's claimed gender identity disorder. If Ms. Osborne is not permitted the opportunity to examine the plaintiff, the credibility of any opinion offered by her could be assailed as a result of their relying solely on the plaintiff's medical records and the examinations conducted by other experts. Further, an examination by Ms. Osborne is necessary in order to explore the extent of the plaintiff's present and future risk for self-injury. Third, gender identity disorder is an unusual mental disorder and mental health professionals often disagree on the existence of the diagnosis and appropriate treatment.

Therefore, where plaintiff has placed his mental state in controversy and there is good cause for the defendants' experts to conduct a mental examination of the plaintiff, the plaintiff should be compelled to undergo a mental examination pursuant to Fed. R. Civ. P. 35(a).

Dated: June 26, 2007

Respectfully submitted,

NANCY ANKERS WHITE
Special Assistant Attorney General

/s/ Richard C. McFarland
Richard C. McFarland, BBO# 542278
Department of Correction

Legal Division
70 Franklin Street, Suite 600
Boston, MA 02110-1300
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CERTIFICATE OF SERVICE

I hereby certify that this document(s) filed through the ECF system will be sent to *pro se* plaintiff by first class mail, postage prepaid, to his address: Massachusetts Treatment Center, 30 Administration Rd., Bridgewater, MA 02324 on June 26, 2007.

/s/Richard C. McFarland
Richard C. McFarland

CURRICULUM VITAE

Cynthia S. Osborne

June 22, 2007

DEMOGRAPHIC INFORMATION

Current Academic Appointments:

Assistant Professor of Psychiatry, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, Maryland

Consulting Faculty, Johns Hopkins Sexual Behaviors Consultation Unit, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, Maryland

Lecturer, Department of Psychology, Johns Hopkins University, Baltimore, Maryland

Faculty Associate, Department of Counseling and Human Services, School of Professional Studies in Business and Education, Johns Hopkins University, Baltimore, Maryland

Adjunct Faculty, Department of Applied Psychology and Quantitative Methods, University of Baltimore, Baltimore, Maryland

Adjunct Faculty, University of Maine, Department of Human Resource Development, Portland, Maine

Personal Data:

[REDACTED]

[REDACTED] Home Office/Primary Mailing Address:

[REDACTED]

[REDACTED] Office Address:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Primary Phone Contact ([REDACTED])

[REDACTED]

Education and Training:

Postgraduate: Certificate in Marriage and Family Therapy, 1981, Family Therapy Training Center, Boston, MA (AAMFT Approved three-year post-graduate certificate program in marriage and family therapy)

Graduate: M.Ed., 1984, University of Maine, Marriage & Family Therapy
M.S.W., 1985, University of Connecticut, clinical casework

Undergraduate: Bachelor of Music, 1971, Alverno College, Psychology/Music

Professional Experience:

Forensic Consultant, provide clinical consultation and expert testimony in cases involving issues of sexuality for state boards of professional licensure, religious orders, third party payors and state departments of correction, current

Human Services Consultant, provide consultation in large systems reform initiatives, current
Consultant, Annie E. Casey Foundation, Baltimore, Maryland, provide consultation to the Foundation's juvenile justice reform initiatives in various states and jurisdictions, current

Private Clinical Practice, Baltimore, Maryland, specializing in the evaluation and treatment of the full range of sexual disorders and problems in children and adults, current

Associate Director, in charge of clinical operations and psychiatry residency education in sexual medicine, Sexual Behaviors Consultation Unit/ Center for Sexual Health & Medicine, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, Maryland, 2000-2004

Consultant, Sweetser Children's Services, Saco, Maine, 2000-2001

Consultant, National Resource Network, Washington Business Group on Health, Washington, DC, 1998-1999, coordinated Initiative to Improve Practice, to identify systems problems and obstacles to improved clinical outcomes in the treatment of children with the most serious emotional and behavioral disorders in more than 40 CMHS grant funded demonstration sites across the country, and to identify mechanisms for disseminating evidenced based training and technical assistance to the sites

Executive Vice President, Sweetser Children's Services, Saco Maine, 1999-2000. Executive oversight of Sweetser Family Institute. Following acquisition of the Family Institute of Maine by Sweetser, in 1999, The Family Institute became a division of the non-profit parent organization, developing, providing and overseeing outpatient mental health services in southern Maine, school based mental health services statewide, all clinical and organizational training internal to the agency, and postgraduate clinical training and systems consultation state/region wide.

Founder, Executive Director, Family Institute of Maine Foundation, Portland, Maine, 1993-1999. The Foundation was a non-profit organization providing family centered clinical services to poor families, postgraduate training opportunities to mental health professionals, mental health policy and systems change initiatives for mental health and child welfare agencies.

Founder, Executive Director, Family Institute of Maine, Portland, Maine, 1983-1999. The Institute was a for-profit clinic providing family centered mental health services to children, adults and families.

Family Therapist, Day One Family & Community Services, Portland, Maine, 1980-83

Psychotherapist, private practice, Farmington and Portland, Maine, 1978-83

Psychotherapist, Milwaukee County Mental Health Center, Milwaukee, Wisconsin, 1973-1976

RESEARCH ACTIVITIES

Publications:

Osborne, C. The Missouri Youth Services Practice Guidebook, Annie E. Casey Foundation, 2007 (in press).

Osborne, C. & Rowland, D. "Evaluation of Psychological Functioning in Men with Sexual

Dysfunction." In Pathophysiology and Treatment of Male Reproductive and Sexual Dysfunction. Kandeel, F., Ed. Marcel Dekker, Inc., 2007.

Rowland, D. & Osborne, C. "Psychological Factors in Males Sexual Dysfunction." In Pathophysiology and Treatment of Male Reproductive and Sexual Dysfunction. Kandeel, F., Ed. Marcel Dekker, Inc., 2007.

Osborne, C. & Wise, T. "Paraphilias." In Handbook of Sexual Dysfunction, Balon, R. & Segraves, T. Eds., Marcel Dekker, Inc. 2005.

Boies, S., Cooper, A. & Osborne, C. "Variations in Internet addiction and psychosocial functioning in online sexual activities: Implications for social and sexual development of young adults." Cyberpsychology and Behavior, 7, 2, 2004.

Osborne, C. "A group model for the treatment of problematic Internet related sexual behaviours." Journal of Sexual and Relationship Therapy, 19, 1, 2004.

Osborne, C. & Wise, T. "Split gender identity: problem or solution? proposed parameters for addressing the gender dysphoric patient." Journal of Sex & Marital Therapy, Volume 28, 2, March-April, 2002.

Wise, T., Osborne, C., Strand, J., Fagan, P. & Schmidt, C. "Alexythymia in patients attending a sexual disorders clinic." Journal of Sex & Marital Therapy, 28, 5, 2002.

Behan, C., Hoffman, L, Osborne, C. *The Christmas Tree Village*. Portland, Maine, 1996. Booklet chronicling a two year project, funded by HUD, providing innovative clinical and support services to HIV/AIDS victims and their families.

Newspaper Articles:

Osborne, Cynthia S. "Even in writing, child pornography can trigger abuse." Op-ed article, Baltimore Sun, Sunday, August 12, 2001.

Research Projects:

Osborne, C., Strand, J., Fagan, P., Wise, T., Schmidt, C., & Rowland, D., Descriptive Research from the Archives of the Sexual Behaviors Consultation Unit, 2001-current. Principal Investigator, 2001-2004.

Osborne, C., Fagan, P., Strand, J. & Ponticas, Y. Piloting the SBCU Behaviors Questionnaire, Principal Investigator, 2001-2004.

Osborne, C., Golombok, S. and Rust, J. The GRISS: A Revalidation Study and Exploration of the GRISS as a Measure of Desire. 2002. Presented at Annual Meeting, Society for Sex Therapy and Research, Las Vegas, Nevada, March 2002.

Extramural Sponsorship:

Grants:

Family Therapy Project for Families Affected by HIV, 1994-96. Sponsor: HUD, total cost \$750,000.

Principal Investigator: Deborah Shields. Lead Agency: The AIDS Project, Portland, Maine. My role: co-wrote family therapy services component of grant; coordinator, family therapy services component of multi agency project providing innovative comprehensive community interventions for HIV/AIDS victims and their families. Total direct cost: \$750,000. 10% effort. *The Family Clinic*, 1998. Envisioned, developed all aspects of specialized mental health clinic to provide couple and family therapy to poor or special needs families in southern Maine. Initial phase of clinic development funded by unrestricted \$25,000 grant from Gannett Family Foundation.

Contracts:

Structural Family Therapy Training Program training contract, Community Health and Counseling Services, Bangor, Maine, 1997-2000. Project Director, wrote curriculum and coordinated training program for 800 employee Children's Services Department of publicly funded social service agency with offices throughout mid and northern Maine. Multi-year effort to transform the agency's mode of operation, across all types and levels of service, to a model that is family-focused and systems-based. Program involved a major reorganization of clinical services in order to promote family stability, and to improve successful reunification outcomes in foster care cases. Wrote separate training curricula for management, clinicians, supervisors, teachers, and multidisciplinary paraprofessional mental health workers. Served as Project Director, faculty supervisor, and program consultant.

The Initiative to Improve Practice, consulting contract with the National Resource Network, at The Washington Business Group on Health, Washington, DC, 1998-1999. Consultant/Project Coordinator of initiative to identify systems problems and obstacles to improved clinical outcomes in the treatment of children with the most serious emotional and behavioral disorders in more than 40 CMHS grant funded demonstration sites across the country, and to identify mechanisms for disseminating evidenced based training and technical assistance to the sites.

Certificate of Advanced Study Program in Couple and Family Therapy, University of Maine, Program launched fall, 1998. Envisioned and designed 30 hour post-masters certificate program in couple and family therapy, wrote curricula for 17 courses, negotiated Independent Affiliates contract with the University of Maine.

Projects:

The Domestic Violence Project, the only formal program in Maine providing systemically oriented couples and sex therapy treatment of violence in couples, and a monthly community forum to promote cooperation and collaboration between clinicians, the criminal justice system, victim advocates and others, to decrease polarization in the professional community, and to decrease violence in the community. Project launched 1995.

Unique Minds Project, a pilot family psychoeducational group program, conducted in collaboration with the Ackerman Institute for the Family in New York City. For children with learning disabilities or attention disorders. Developed *The Family Fund*, providing project scholarships to poor families. *The Family Fund* was successfully supported by grants from Key Bank and the Kenduskeag Foundation, Portland, Maine. Project launched 1996.

The Divorce Project. Designed project providing specialized clinical services to poor, highly Conflicted families transitioning through divorce or post-divorce re-structuring, to prevent

damaging post-divorce structures that block children's healthy development. Negotiated collaborative agreement with Pine Tree Legal to co-develop comprehensive, coordinated legal and mental health services to poor families. Project launched 1997.

Family of the Year Grant. Designed project that honors, annually, a family exemplifying the diversity of definitions and structures today and families' creative or courageous attempts to establish or maintain stability through challenging times. Coordinated annual fundraising initiative to support the grant.

The Human Identity Project. Designed project providing innovative anti-bias programs for Maine's minority populations. Project launched 1995.

The Lunch Club. Designed project that provided structured lunch experiences for eating disordered women during the work day. A program of the Human Identity Project.

School Collaboration Project. Designed project that develops school based innovative youth facilitated psychoeducational programs to counter youth problems such as homophobia and eating disorders in teens. Project launched 1995. A program of the Human Identity Project.

EDUCATIONAL ACTIVITIES

Teaching:

Classroom Instruction:

Family Therapy, graduate course, primary instructor, University of Baltimore, winter 2004.

Gender Identity Disorder & Intersex Conditions, lecturer in undergraduate course, Origins of Human Sexual Orientation and Variation, Department of Psychology, Johns Hopkins University, winter 2004.

Couple and Family Therapy: Basic Concepts and Methods, graduate course, primary instructor, Johns Hopkins University, Homewood campus, summer 2000, fall 2000.

Assessment in Couple and Family Therapy, graduate course, primary instructor, University of Southern Maine, spring semester 1999.

Family Therapy: Basic Concepts and Methods, graduate course, primary instructor, University of Southern Maine, fall semester 1998.

Human Sexuality, graduate course, primary instructor, University of Southern Maine. Teach this course annually, 1996-2000.

Clinical Instruction:

Assistant Professor, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, Maryland, current.

Teach 3rd year psychiatry residents rotating through the Sexual Behaviors Consultation Unit for six month cycles.

Teach 3rd year medical students rotating through the Sexual Behaviors Consultation Unit for one month cycles.

Three Year Intensive Couple & Sex Therapy Training Program, Family Institute of Maine, Portland, Maine, 1983-1999. Developed curriculum and provided direct teaching one full day weekly to post graduate trainees, using lecture, case conference, and live

supervision of cases.

Three Year Intensive Family Therapy Training Program, Family Institute of Maine, Portland, Maine, 1983-1999. Developed curriculum and provided direct teaching one full day weekly to post graduate trainees, using lecture, case conference, and live supervision of cases.

Adjunct Faculty, Maine Medical Center, Department of Psychiatry, 1985-2000, provided weekly training of psychiatry residents in family and group psychotherapy.

CE/CME Instruction:

Female Sexual Dysfunction – Focus on Women's Health Issues 2003, Inova Fairfax Hospital, Falls Church, VA, October 25, 2003

Female Sexual Dysfunction – Psychological and Relational Aspects and Treatment, November, 2003, Topics in Psychiatry, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine.

Improving Outcomes: Using Managed Care Technologies to Improve Practice, July, 1999, workshop presenter, Sweetser Children's Services, Saco, Maine

Partner Violence Against Women, May, 1999, workshop presenter, Shoreline Community Mental Health Center, Brunswick, Maine

Supervision Training Workshop, 30 hour course, approved by the American Association for Marriage and Family Therapy, offered twice a year since 1997, Instructor, Family Institute of Maine, Portland, Maine

Sexual Disorders and Couples Therapy, July, 1998, workshop presenter, Family Institute of Maine, Portland and Bangor, Maine

Eating Disorders Treatment: A Comparative Study, Nov, 1998, workshop presenter, Family Institute of Maine, Portland & Bangor, Maine

Advanced Topics in Ethics: Duty to be Skeptical, June and Oct, 1998, workshop presenter, Bangor, Maine; Sept, 1998, Portland, Maine

Family Therapy with Difficult Populations, April, 1997, workshop presenter, Maine Department of Substance Abuse, Augusta, Maine

Ethics: A Systemic View, Sept, 1997, workshop presenter, Family Institute of Maine, Portland, Maine; October, 1997, Bangor, Maine

Narrative Therapy and the Treatment of Anorexia Nervosa, Oct, 1997, The Many Faces of Addiction Conference, workshop presenter, Mercy Hospital, Portland, Maine

Advanced Topics in Ethics: Confidentiality, March, 1997, workshop presenter, Family Institute of Maine, Portland, Maine

Structural Assessment of Addicted Families, July, 1997, workshop presenter, Maine Medical Center, Portland, Maine

Setting Up a Practice; The Nuts and Bolts, April, 1997, workshop presenter, Family Institute of Maine, Portland, Maine

Group Treatment of Eating Disorders, March, 1996, workshop presenter, Family Institute of Maine, Portland, Maine

Systemic Treatment of Eating Disorders: An Advanced Course, February, 1995; March, 1996, Workshop presenter, Family Institute of Maine, Portland, Maine

Family Therapy for Guidance Counselors, a 12 week course, Jan, 1995; June, 1996, course instructor, Family Institute of Maine, Portland, Maine

Eating Disorders Treatment: An Introduction, February, 1995, workshop presenter, Family Institute of Maine, Portland, Maine
Working with Parents, 8-week course, June -- August, 1995, course instructor, Family Institute of Maine, Portland, Maine
Ethics: A Review of the Basics, September, 2000, workshop presenter, Family Institute of Maine, Portland, Maine
Advanced Topics in Ethics: Sexual Feelings, May & September, 2000, workshop presenter, Family Institute of Maine, Portland, Maine.
Ethics: A Review of the Basics, September, 2000, workshop presenter, Family Institute of Maine, Portland.

Mentoring (Below is a partial list of present and past supervisees):

Clinical faculty group, Sexual Behaviors Consultation Unit, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, Maryland, 2000-2004, facilitated monthly supervision group consisting of the Unit's clinical faculty, in cases involving the full range of psychosexual disorders and dysfunctions.

Kristin Hurley, M.S.Ed., doctoral student in psychology, Loyola University, Baltimore, Maryland, family therapy supervisor, 2000-2001.

Mercy Hospital Recovery Center, 1993-1999, consultant to inpatient substance abuse program manager, provided weekly consultation and supervision on clinical and program issues.

Robin Neal, M.S., family therapy supervisor, Tri County Mental Health Center, Lewiston, Maine, 1998-2002. Mentoring Ms. Neal in her studies to qualify as Approved Supervisor, with the American Association for Marriage & Family Therapy. Face to face mentoring sessions took place monthly and included live supervision and videotape critique of her work as a clinical supervisor.

Joan Hall Austin, MSW, family therapist, Acadia Hospital, Bangor, Maine. 1998-2001.

Supervised Ms. Hall Austin in monthly face to face supervision for one year. Current format is monthly telephone supervision of her work in family therapy and couple and sex therapy cases.

Katherine Roberts, MSW, psychotherapist, Family Institute of Maine, Portland, Maine, 1997-2000. Supervised Ms. Roberts weekly in family, couple and sex therapy cases.

Sarah Maloney, MSW, psychotherapist, Family Institute of Maine, Portland, Maine, 1998-present. Supervised Ms. Maloney weekly (now monthly) in couple and sex therapy cases.

Steven Gilbert, MSW, psychotherapist, Family Institute of Maine, Portland, Maine, 1998-present. Supervised Mr. Gilbert weekly in family therapy and couple and sex therapy cases. (Now monthly.)

Christopher Behan, MSW, psychotherapist, Family Institute of Maine, Portland, Maine, 1990-1999. Supervised Mr. Behan weekly in family therapy and couple and sex therapy cases.

Eric Aronson, Psy. D., psychologist, Family Institute of Maine, Portland, Maine, 1996-98. Supervised Dr. Aronson weekly in family therapy and couple and sex therapy cases.

Deborah Sheehan, MSW, psychotherapist, Family Institute of Maine, Portland, Maine, 1990-1998. Supervised Ms. Sheehan weekly in family therapy and couple and sex therapy cases.

Margaret Brown, MSW, psychotherapist, Family Institute of Maine, Portland, Maine, 1987-1990. Supervised Ms. Brown weekly in family therapy and couple and sex therapy cases.

CLINICAL ACTIVITIES

Certification:

Licensed Clinical Social Worker – Clinical – State of Maryland

Licensed Clinical Social Worker – State of Maine

Clinical Member/Approved Supervisor, American Association for Marriage & Family Therapy

Certified Sex Therapist, American Association of Sex Educators, Counselors & Therapists

Certified Sex Educator, American Association of Sex Educators, Counselors & Therapists

Certified Sex Therapy Supervisor, American Association of Sex Educators, Counselors & Therapists

ORGANIZATIONAL ACTIVITIES

Professional Societies:

Member, American Family Therapy Academy

President – 1998, Maine Association for Marriage & Family Therapy

Clinical Member and Approved Supervisor, American Association for Marriage and Family Therapy

Certified Sex Therapist, Educator and Supervisor, American Association of Sex Educators, Counselors and Therapists

Clinical Member, Society for Sex Therapy and Research

RECOGNITION

Awards:

Outstanding Contribution to the Field of Marriage & Family Therapy Award, American Association for Marriage and Family Therapy, 1997.

Invited Talks, Panels:

Domestic Violence, May, 1998, Panelist, Maine Group Psychotherapy Society

Women and Sex, Oct, 1998, Keynote Address, Annual Conference, American Association of Women's Health Care Providers, Bar Harbor, Maine

Case Presentation: A Successful Treatment Case of Internet Sexual Compulsivity. Invited presentation at the Annual Meeting, Society of Sex Therapy and Research, Las Vegas, March 2002.

Desire at Midlife, November, 2002, Women's Journey, Johns Hopkins University School of Medicine, Baltimore Marriott Waterfront Hotel.

Cybersex, November 2003, Women's Journey, Johns Hopkins University School of Medicine, Baltimore Marriott Waterfront Hotel.

Media Interviews:

Transsexuals: Rights in the Workplace, article in the Washington Post, December 27, 2000.

Quoted as mental health expert.

Kissing: Why We Do It and What It Means, article in the Baltimore Sun, Sunday, February 11, 2001. Quoted as expert in human sexuality.

Indecent Exposure Cases Increase, article in Baltimore Sun, August 22, 2001. Quoted as expert in human sexuality.

RECENT EXPERT TESTIMONY:

Kosilek v. Commonwealth of Massachusetts (Case No. W53863). 2005-current. Provided expert reports in May 2005 and November 2005; gave expert testimony in June 2006.

Battista v. Commonwealth of Massachusetts (Case No. M-15930). 2005-current. Provided expert report October 2005.

Konitzer v. Bartow et al. (EDWI Case No. 03-C-0717). 2005-current. Provided expert report January 2005, deposition May 2005.

Ophelia De'Lonta, a/k/a M. Stokes v. Ronald J. Angelone, et al. (State of Virginia) (C.A #7:99-CV-00642). 2004. Provided expert report May 2004.

Washington DC Board of Medicine v. Todd Berner, MD, provided expert testimony in medical malpractice case, 2002(?).

Berner v. Berner, expert testimony in child custody case, 2001(?).